

# City of Banning

## TRANSPORTATION PERMIT

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME ADDRESS CITY/STATE/ZIP OFFICE PHONE NUMBER (Include Area Code)      FAX NUMBER (include Area Code)	PERMIT VALID: FROM: TO: MOVING AUTHORIZED: SATURDAY: SUNDAY: DARKNESS (CVC 280):	PERMIT NUMBER  THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ATTACHMENTS: <input type="checkbox"/> Permit Conditions <input type="checkbox"/> Holiday Restrictions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
(SHOW A DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO. INCLUDE DIMENSIONS OF LOAD) Authorization is granted for the following: <input checked="" type="checkbox"/> Haul <input type="checkbox"/> Drive <input type="checkbox"/> Tow		

**DESCRIPTION OF HAULING EQUIPMENT**

	VEHICLE WIDTH:	10'0"	KINGPIN TO LAST AXLE:	N/A	COMB. VEHICLE LENGTH:	95'0"
AXLE NUMBER	1	2	3	4	5	6
NUMBER TIRES PER AXLE						
DISTANCE BETWEEN AXLES						
WIDTH OF AXLES AT TIRE SIDEWALL						
MAXIMUM ALLOWABLE WEIGHT						

**LOADED DIMENSIONS GREATER THAN THOSE SHOWN BELOW OR WEIGHTS EXCEEDING THOSE SHOWN ABOVE ARE NOT AUTHORIZED**

LOADED HEIGHT:	LOADED WIDTH:	LOADED OVERALL LENGTH:	LOADED OVERHANG:	WEIGHT CLASS:
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ORIGIN: \_\_\_\_\_ DESTINATION: \_\_\_\_\_

**AUTHORIZED STATE HIGHWAYS - CITY AND/OR COUNTY PERMITS ARE REQUIRED WHEREVER THE \* IS SHOWN IN THE STATE ROUTE.**


PILOT CAR     Yes     No

CASH, CHARGE CREDIT CARD OR EXEMPT INFORMATION	APPLICANT'S SIGNATURE	DATE
CREDIT CARD EXP. DATE	FEE \$	NUMBER OF TRIPS
	AUTHORIZED STATE AGENT	DATE

REQUESTED ROUTE: (Include Address of Origin and Delivery Site)

CONTACT PERSON: \_\_\_\_\_